

on the back of the hand is paler, and no suspicion of lupus present; but the periphery of the patch on the cheek is redder, and at one or two points are seen spots which suggest the return of lupous foci."

OBSTETRICS.

UNDER THE CHARGE OF

EDWARD P. DAVIS, A.M., M.D.,

PROFESSOR OF OBSTETRICS AND DISEASES OF CHILDREN IN THE PHILADELPHIA POLYCLINIC;

CLINICAL LECTURER ON OBSTETRICS IN THE JEFFERSON MEDICAL COLLEGE;

VISITING OBSTETRICIAN TO THE PHILADELPHIA HOSPITAL, ETC.

PERFORATION OF THE UTERUS FOLLOWING AN INTRA-UTERINE DOUCHE; SUBLIMATE POISONING.

GEBHARD (*Zeitschrift für Geburtshülfe und Gynäkologie*, Band xxi., Heft 2) reports an interesting case in which intra-uterine douches were given to a multipara in the treatment of gonorrhœa. The patient was not pregnant at the time. While the third douche was being given the patient complained of pain in the abdomen, followed by giddiness, vomiting, and unconsciousness. Rapid pulse, with pallid features and perspiration, followed her recovery from the shock of the injection. Symptoms of mercurial intoxication, with bloody, mucous diarrhœa supervened; the patient dying eight days after the injection. On post mortem examination two perforations of the uterus were found, admitting a uterine sound readily. The sublimate solution, 1:5000, had been absorbed by the peritoneum. Microscopic examination of the kidneys showed the epithelium of the tubules infiltrated with an amorphous substance from which calcium crystals were readily produced by treating with sulphuric acid.

PUERPERAL PSYCHOSES, WITH REFERENCE TO ECLAMPSIA.

OLSHAUSEN (*Ibid.*) reviews the literature of the puerperal psychoses with especial reference to the relation between them and eclampsia. He concludes that psychoses are not rare after eclampsia, developing usually from two to four days after the eclamptic outbreak. Hallucinations are constant, the derangement proceeds rapidly, without fever, and usually tends to eventuate in recovery. Mental derangement persisting for several months is rare after eclampsia. It is as yet impossible to say what cases of eclampsia especially predispose to psychoses; mental derangement follows various intoxications, and among these are affections following chronic kidney lesions and uræmia.

Olshausen divides puerperal psychoses into: 1. Those following fever—infection psychoses. 2. Idiopathic, without fever or constitutional cause; under this head are included the greater part of the psychoses of the puer-

peral state, that accompanying lactation and following hemorrhage at labor.
3. Intoxication psychoses, following eclampsia, or exceptionally with uræmia without eclampsia.

KNOTS IN THE CORD IN TWIN PREGNANCIES.

An instance of this rare complication of pregnancy is reported by HERRMANN (*Archiv für Gynäkologie*, Band xl. Heft 2). But sixteen cases could be recorded, and as this complication can only arise when the twins occupy the same fetal sac, its occurrence is rare.

Herrmann's case was one of twin abortion in a multipara, following a fall. The cords seemed fused together in an ovoid mass, which on careful examination was found to be two intertwined figure-of-eight knots. Such intertwining of cords has been observed to follow violent fetal movements, and also sudden exertion on the mother's part. In the great majority of cases fetal death and premature labor follow.

PREGNANCY COMPLICATED BY FIBRO-CYST OF THE OVARIAN LIGAMENT; ECTOPIC PREGNANCY, TREATED BY LAPAROTOMY.

DOLÉRIIS (*Nouvelles Archives d'Obstétrique et de Gynécologie*, No. 7, 1891) reports the case of a woman who bore a dead child after a protracted labor complicated by the presence of a fibro-cyst of the ovarian ligament. Recovering from this labor she became again pregnant and bore a living child at term. When lactation ceased, her menstruation became deranged, and she consented to laparotomy for the removal of the tumor. This was readily accomplished, the mass proving to be what had been diagnosed. Uninterrupted recovery followed.

Doléris also reports the case of a woman, married eight years without conception. After amenorrhœa of two months' duration, she expelled a membranous mass from the uterus, with great pain. On examination the uterus was found slightly enlarged. A small tumor could be felt on the left side, behind the uterus. A diagnosis of salpingitis with hæmato-salpinx was made and the uterus was curetted and disinfected. Three days later laparotomy was performed, when tubal pregnancy was found on the left side, and upon the right a sclerosed ovary. The patient made an uninterrupted recovery after the removal of both.

THE PROTECTION OF THE PERINEUM DURING THE PASSAGE OF THE SHOULDERS.

COUDER (*Archives de Tocologie et de Gynécologie*, No. 7, 1891) has found it of advantage to unfold an arm when the shoulders present with folded arms after the expulsion of the head. When a hand presents before the shoulders, it should be drawn down and the arm entirely delivered. When this is not possible, the hips of the mother should be raised, and when the head has rotated externally, the head must be pulled down and the anterior arm freed to the elbow. The elbow is then to be flexed toward the back of the fetus and the anterior arm entirely extracted. The head is then to be raised and the trunk allowed to emerge slowly.

THE DEVELOPMENT OF THE PLACENTA.

A possible explanation of some clinical facts is afforded by YOUNG, in a summary, the results of investigations upon the development of the placenta. It seems probable that the foetal epiblast extends over the greater part of the placental area, replacing the maternal decidua and resembling in its growth the formation of epithelial tumors. This mass of epithelium is tunnelled by blood spaces communicating with maternal bloodvessels into which foetal capillaries, free from epithelial investment, project.

These facts explain the ready passage of micrococci from mother to foetus. Foetal nutrition results from ready diffusion through the walls of the capillaries. After abortion, retained placental epithelium and continued development of foetal epithelium may result in carcinoma.—*The Medical Chronicle*, No. 4, 1891.

MATERNAL IMPRESSION FOLLOWED BY THE PRODUCTION OF A MONSTER.

An interesting example of the direct association of maternal impression and the production of monsters is given by GROUND (*Northwestern Lancet*, No. 15, 1891). A primipara, illegitimately pregnant, gave birth to a seven-months' foetus in which the arch of the skull was absent, and other malformations existed, giving the foetus an especially horrible appearance. Shortly after, a pregnant patient saw the monster in a jar in a physician's office, and was deeply impressed by its appearance. Six weeks after seeing the monster, she aborted at four months with a monster closely resembling the first.

GYNECOLOGY.

UNDER THE CHARGE OF

HENRY C. COE, M.D., M.R.C.S.,
OF NEW YORK.

THE ACTION OF THE GALVANIC CURRENT UPON UTERINE FIBROIDS.

BÄCKER (*Centralblatt für Gynäkologie*, No. 28, 1891) reports a case in which intra-uterine galvanization was employed for five months at intervals of two or three days, the strength of the current varying from 50 to 140 milliampères. At the end of this period the tumor had decreased in size one-half, several necrosed fragments having been discharged *per vaginam*. From a careful analysis of similar recorded cases it appears that whenever a fibroid tumor is positively reduced in size by the action of galvanism, this is due to softening of the deeper parts of the neoplasm, with subsequent contraction of the surrounding tissue. There is probably an actual formation of thrombi in the vessels of the tumor. The process of electrolysis does not consist so much in a decomposition of the albumins; the current follows principally the